

Presidential Advisory Council on HIV/AIDS (PACHA)

Resolution Concerning Urgent Action Recommended for Syphilis Syndemic

Whereas, having syphilis can increase a person's risk of acquiring HIV and for those living with HIV, syphilis may progress faster and be harder to treat;¹

Whereas, PACHA held its 77th full council meeting in Phoenix, AZ between June 28 - 29, 2023 and visited HIV programs the day prior, PACHA members heard urgent concerns of large and escalating numbers of syphilis and congenital syphilis cases from HIV providers serving American Indian/Alaskan Native and other patients requiring a robust and comprehensive federal, state, and local response in partnership with tribes and tribal organizations;

Whereas, several PACHA members in their usual roles are seeing the same escalating number of syphilis and congenital syphilis cases and some of their jurisdictions are declaring syphilis outbreaks and public health emergencies;

Whereas, in 2021 there were 176,713 cases of syphilis reported in the U.S., which was a 32% increase in the reported rate from the prior year, and of those 176,713 cases, 53,767 of those were primary and secondary cases, the most infectious stages;²

Whereas, all regions of the U.S. have had large increases in the rates of primary and secondary syphilis, the West having the highest with a 25% increase from 2020, followed by the South with a 26% increase, then the Midwest with a 48% increase, and the Northeast with a 21% increase;³

Whereas, between 2020 and 2021, the rate of primary and secondary syphilis among women increased 55% and 23% in men;⁴

Whereas, rates of primary and secondary syphilis increased in all racial/Hispanic ethnicity groups, and Non-Hispanic American Indians or Alaska Native persons had the greatest five-year increase of reported primary and secondary syphilis with a 324% increase between 2017 and 2021;⁵

Whereas, during 2017 to 2021, 46% of primary and secondary syphilis cases were among men who have sex with men, and increased by 7% from 2020 to 2021;⁶

¹ <https://www.healthline.com/health/hiv/syphilis-and-hiv#outlook>

² <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 4) all were accessed on June 29, 2023

³ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 7)

⁴ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 6)

⁵ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 12)

⁶ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 23)

Whereas, in 2020, 9.9% of persons with primary or secondary syphilis reported methamphetamine use, 5.9% reported injection drug use, 3.5% reported cocaine use, 2.4% reported heroin use, and 1.3% reported crack use;⁷

Whereas, in 2021, there was a total of 2,855 babies with congenital syphilis, all of which are preventable with appropriate screening of persons who are pregnant, and this was a 30% increase in the rate from 2020;⁸

Whereas, tragically, 220 of these babies born with congenital syphilis died (197 stillbirths and 23 infant deaths);⁹ which was a 45% increase from 2020 (152 deaths) and a 175% increase from 2017 (80 deaths);¹⁰

Whereas, the FDA listed Bicillin® L-A (penicillin G), the preferred treatment, as in shortage as of April 26, 2023 and estimated recoveries not until second quarter of 2024;^{11,12}

Whereas, on June 13th, governmental public health jurisdictions received word that as part of H.R. 3746 there was a \$400 million rescission in funds that support disease intervention specialists (DIS), the public health workforce that helps to identify, control, and prevent disease transmission and outbreaks, which will defund 3,000 DIS workers.¹³

Therefore, be it resolved that, the PACHA recommends and advises the Secretary of the United States Department of Health and Human Services (HHS) to:

1. Establish, with urgency, a Federal Task Force led by HHS that includes other Federal agencies, as appropriate, to coordinate a comprehensive response to limit and control this syndemic, and that it be timely and effectively coordinated with state and local governmental public health and health care providers and meaningfully inclusive of community-based organizations and other community stakeholders, and Tribal Nations;
2. Conduct tribal consultation with tribal nations through the HHS Tribal Consultation Policy which is required before “any action is taken that will significantly impact Indian Tribes;”
3. Notify, with urgency, health care providers, substance use care providers, and the public about the urgent threat of syphilis, including congenital syphilis, and work to ensure all persons, including pregnant persons, receive the recommended screening for syphilis and treatment as appropriate;
4. Give full consideration to declaring the syphilis syndemic a public health emergency;

⁷ <https://www.cdc.gov/std/statistics/syphilis-supplement/default.htm> (Syphilis Surveillance Supplemental Slide set, slide 4)

⁸ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 31)

⁹ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 43)

¹⁰ <https://www.cdc.gov/std/statistics/2021/figures.htm> (Syphilis slide set, slide 91)

¹¹

https://www.accessdata.fda.gov/scripts/drugshortages/dsp_ActiveIngredientDetails.cfm?AI=Penicillin%20G%20Benzathine%20Injectable%20Suspension&st=c accessed June 29, 2023

¹² https://www.pfizerhospitalus.com/injectables_availability_report?cmp=fa99c71c-60f6-4151-bfd5-dd64c7c116e6&ttype=RTE accessed July 3, 2023

¹³ <https://www.ncsddc.org/ncsd-marks-debt-ceiling-deal-as-a-devastating-blow-to-the-fight-against-rising-sti-rates/> accessed June 29, 2023

5. Work with the U.S. Food and Drug Administration, and Administration for Strategic Preparedness and Response, manufacturers, and other appropriate entities to address, as rapidly as possible, the shortage of Bicillin® L-A and evaluate equivalent alternative treatment modalities for syphilis during the shortage;
6. Further explore the targeted use of doxycycline post-exposure prophylaxis as a strategy to prevent incident syphilis cases; and
7. Work with federal agencies to evaluate all options to retain the DIS workforce who are on the front line addressing this syndemic, and further work to retain, long-term, this vital public health workforce.